

Mr. CARDOZA. Mr. Speaker, I yield 1½ minutes to the gentlewoman from Texas (Ms. JACKSON-LEE).

Ms. JACKSON-LEE of Texas. Mr. Speaker, I thank the distinguished gentleman from California for yielding me this time, and I thank him for his leadership on this motion.

I am delighted that my good friend from Texas, and we are good friends, put on the record that there will be no change in the Republican bill on defined benefits. That means that our seniors know what they are talking about. They are against that bill, because they will not get a prescribed, guaranteed Medicare prescription drug benefit as it now stands.

So the reason why we have a motion to instruct is because we are fighting not to privatize Medicare and, in so doing, I say to my colleague, the gentleman from California (Mr. CARDOZA) has rightly suggested that the premiums that we will save, we can then invest in our DSH hospitals who are suffering and whose doors are closing.

I want a guaranteed prescription drug benefit, Medicare prescription drug benefit, and I am committed to working with the gentleman from California (Mr. CARDOZA) and my friends on the other side of the aisle to get what seniors understand is realistic, something this Congress, Republicans and Democrats, have promised for over 10 years.

But as we are working now, it is important, since we are locked out of the conference, that we instruct them to recognize the importance of helping the suffering hospitals that I have in my district. Northwest Memorial Hospital, which I had a chance of visiting, has an enormous caseload of uninsured patients, if you will, or uninsured individuals in their service area. They have a desire to have a prenatal clinic that will serve a number of individuals, including our Hispanics and other minorities in the area. They cannot do it because they do not have the money.

Mr. Speaker, let us support this motion to instruct that provides the resources to help our hospitals from closing their doors.

Mr. BRADY of Texas. Mr. Speaker, I yield myself the remaining time, and I will be brief in closing.

The fact of the matter is that the section I read, this law, this very thick law deals with existing Medicare today, where we offer reinsurance to seniors that there will be no change in those defined benefits. But the rest of that very thick bill talks about two things. The way that we can help seniors finally pay for the prescription costs that are so valuable to them, but so expensive, and, in a way that we are talking about tonight, we can offer seniors new choices in health care plans while we are making Medicare last longer and perform better.

This is the issue we have before us tonight: whether we are willing to just simply add prescription drugs to Medicare, a load that will be too large when

our baby boomers, our next generation come to rely upon Medicare; or do we add prescription drug coverage in a way that we also improve Medicare, where we make it last longer, where we make it a better system for our seniors, one that the next generation can count on; where we give the reforms and offer the choices that Members of Congress and our Federal workers have; where it is not Washington one-size-fits-all plans; where we do not dictate to people and mandate to people; where we do not ration the health care; where we do not tell them what is best for them; and where the bureaucracy does not get in-between the doctor and the patient.

Mr. Speaker, our seniors want help with prescription coverage, but they also want a Medicare system they can count on for years and years and years to come. These reforms, these improvements will lengthen Medicare, make it a better health care system, offer new choices for seniors who want them, and offer the types of choices the Members of Congress have. That is the debate tonight.

It all comes down to this: why is the health care system we have good enough for us in Congress, but not good enough for our seniors back home? My answer is that it is. They ought to have those same types of choices. They have earned it. They deserve it. And we are going to have a system that is not only better, but will last a long, long time.

Mr. Speaker, I yield back the balance of my time.

Mr. CARDOZA. Mr. Speaker, I yield myself such time as I may consume.

I would first like to thank all of my colleagues who spoke on behalf of this motion today. I would like to thank my colleague from Texas (Mr. BRADY) from across the aisle for participating in this debate. We may differ in our opinions about which way is the best way to reform Medicare, but I appreciate his willingness to engage, in any case.

I would like to urge my colleagues on both sides of the aisle to consider supporting my motion to instruct. The premium support provisions in both the House and Senate versions of this bill are a recipe for disaster for our seniors. If premium support is enacted, our seniors will be subjected to vastly different premiums and benefits depending on where they live, they will be forced to assume all the risks associated with health care, and they will most likely lose their ability to choose their preferred doctor and hospital, that is, if the private plans even participate.

In my district, all but one of the supplemental private insurance plans we have once had have pulled out of our area, leaving my constituents in a serious lurch. Let us not take this giant risk again, Mr. Speaker. Let us instead spend our resources helping our safety net hospitals survive. DSH hospitals are the backbone of our communities, and the number of uninsured continue

to grow, as do their responsibilities to serve these populations. My motion retains the best provisions from both the House and Senate, and allocates any monies saved from dropping premium support to DSH hospitals across the United States.

Mr. Speaker, I urge an "aye" vote.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Without objection, the previous question is ordered.

There was no objection.

The SPEAKER pro tempore. The question is on the motion to instruct offered by the gentleman from California (Mr. CARDOZA).

The question was taken; and the Speaker pro tempore announced that the yeas appeared to have it.

Mr. CARDOZA. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

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#### PROPOSED USE OF DISTRICT OF COLUMBIA PUBLIC SAFETY FUNDS RELATED TO TERRORIST THREATS—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES (H. DOC. NO. 108-140)

The SPEAKER pro tempore (Mr. PEARCE) laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, without objection, referred to the Committee on Appropriations and ordered to be printed:

#### *To the Congress of the United States:*

Consistent with Division C, District of Columbia Appropriations Act of Public Law 108-7, the Consolidated Appropriations Resolution, 2003, I am notifying the Congress of the proposed use of \$10,623,873 provided in Division C under the heading "Federal Payment for Emergency Planning and Security Costs in the District of Columbia." This will reimburse the District for the costs of public safety expenses related to security events and responses to terrorist threats.

The details of this action are set forth in the enclosed letter from the Director of the Office of Management and Budget.

GEORGE W. BUSH.  
THE WHITE HOUSE, November 6, 2003.

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#### CONFERENCE ON THE CHANGING NATURE OF THE HOUSE SPEAKERSHIP

(Mr. DREIER asked and was given permission to address the House for 1 minute and to revise and extend his remarks and include therein extraneous material.)

Mr. DREIER. Mr. Speaker, it is among my duties to keep in mind the historical precedents of this body when